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\*\* CONTINUING DATA \*\*\*\*\*  
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\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>	STATE OR COUNTRY ITALY	SHEETS DRAWING 0	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
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Verified and Acknowledged  
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TITLE  
 Pharmaceutical compositions with antibiotic activity

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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